

# BEST AVAILABLE COPY

ISSUE SLIP STATE AREA (for additional cross references)

416105 9-20-99

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JRW	75031	
O.I.P.E. CLASSIFIER		8	2-3-99
FORMALITY REVIEW	CP	1089185	2-10-99

## INDEX OF CLAIMS

✓ Rejected N Non-elected  
 = Allowed I Interference  
 - (Through numeral) Canceled A Appeal  
 + Restricted O Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet her

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